



## 2019 Schedule C/Self Employment Checklist

Taxpayer name: \_\_\_\_\_

Social Security number: \_\_\_\_\_

The following forms are needed for **EVERY** supporting documentation submission. These forms are required for anyone with Schedule C income or a 1099MISC with income in box 7.

- Completed & Signed Schedule C Interview Worksheet
  - Completed & Signed Schedule C Worksheet
  - Proof of ALL income and expenses (categorized, organized, and totaled).  
\*Income and expenses cannot be taxpayer created but must be verifiable through a third party. (i.e. receipts, cashed checks, etc.)
  - ALL 1099MISC forms (if they received any)
  - This completed form
  - Completed Supporting Documentation Cover Sheet
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The following forms are common items the taxpayer may have. Please check the boxes below of all the forms that apply to this taxpayer.

- Mileage Log (if they are claiming mileage, they must have a mileage log that includes the following: date of trip, reason for trip, starting odometer reading, ending odometer reading)
- Completed Auto Expense Worksheet if claiming mileage or auto expenses
- If the taxpayer maintains inventory (food trucks, Mary Kay, etc.)  
Beginning inventory \$ \_\_\_\_\_ Ending inventory \$ \_\_\_\_\_
- Other forms: \_\_\_\_\_

Preparer Name: \_\_\_\_\_ EFIN \_\_\_\_\_

Sun Loan store phone number: \_\_\_\_\_



## 2019 Schedule C Interview Sheet

**Documentation must be legible and submitted in the correct format for ATS to process the return. To be considered complete questions #1 - #7 must be answered and the form signed for all self-employed taxpayers including taxpayers who received 1099-MISC forms with income listed in box 7.**

1. Taxpayer Name: \_\_\_\_\_
2. Social Security Number \_\_\_\_\_

3. Please provide a description the taxpayer's business (type of work, product sold, service provided, where your business is conducted, etc.)

\_\_\_\_\_  
\_\_\_\_\_

4. How long has the taxpayer owned this business or done this job? \_\_\_\_\_

5. Can the taxpayer provide any documents to substantiate your business? **Yes No** (If NO we would be unable to prepare this return)

Check all that apply

Advertisements  Business License  Business Stationary  Invoices

Receipts/Receipt Book  Business Quotes  Business Cards

Business Insurance  Other – please describe: \_\_\_\_\_

6. Who maintains the business records? \_\_\_\_\_

7. What records of income and expenses were provided? Check all that apply

Accounting Records  1099-MISC  Car/Truck Expenses

Paid Invoices  Ledgers/Log books  Computer records

Business bank accounts  Suppliers (names and addresses)

***I, the undersigned, hereby certify that all the information provided on this form is true and correct.***

Taxpayer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Employee signature: ***I verify the taxpayer provided the above documents.***

\_\_\_\_\_  
Date: \_\_\_\_\_

**YOU MUST COMPLETE SCHEDULE C WORKSHEET**



# 2019 Schedule C Worksheet

**Documentation must be legible and submitted in the correct format for ATS to process the return. If the taxpayer did not have any expenses you can leave those fields blank.**

Taxpayer name \_\_\_\_\_

Social Security number \_\_\_\_\_

Type of business \_\_\_\_\_

**Income:**

Total income listed on all 1099-MISC forms in box 7 (if any). \$ \_\_\_\_\_

Gross receipts/sales – direct income not reported on a 1099-MISC....\$ \_\_\_\_\_

**Expenses:** (Sun Loan employee must initial next to each box to confirm supporting documentation was received from the taxpayer.)

- Advertising.....\$ \_\_\_\_\_
- Contract Labor – total amount the taxpayer paid to any worker(s)..\$ \_\_\_\_\_
- Business Insurance – workman’s comp, liability, etc.....\$ \_\_\_\_\_
- Office expenses – software, cell phones, etc.....\$ \_\_\_\_\_
- Supplies – paper, pens, printer ink, etc.....\$ \_\_\_\_\_
- Business taxes and Licenses.....\$ \_\_\_\_\_
- Business travel – lodging.....\$ \_\_\_\_\_
- Meals.....\$ \_\_\_\_\_
- Other Expenses: please describe and use the back of this sheet if needed  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

If you have car and/or truck expenses, please complete the Auto Expense Worksheet

***I, the undersigned, hereby certify that all the information provided on this form is true and correct.***

Taxpayer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Employee Signature: ***I verify that the taxpayer provided the above documentation.***

\_\_\_\_\_ Date: \_\_\_\_\_

**Complete the Taxpayer Schedule C Interview Worksheet**